PATENT APPLICATION FEE DETERMINATION RECO							RD Application of Eccket Number				
Effective December 29, 1999							09 655325				
CLAIMS AS FILED - PART I						SMA	LL ENTIT	Y	OTHE	R THAN	
FC	\D	l sú na	(Column 1)	(Colu	TYF	E	OR	SMALL	ENTITY		
	· · · · · · · · · · · · · · · · · · ·	NOM	BER FILED	FILED NUMBER EXTRA		RAT			RATE	FEE	
BASIC FEE							345.0	00 OR		690.00	
TOTAL CLAIMS		4	44 minus 20= • 24		X\$ 9)=	OR	X\$18=	43260		
NDEPENDENT CLAIMS		AIMS	10 minus 3 = - 7		7	X39	=	OR	X78=	5460	
MULTIPLE DEPENDENT CLAIM PRESENT							_			700	
If the difference in column			is less than 76	ero enter "0" in o	column 2	+130		OR	L	1772	
	If the difference in column 1 is less than zero, enter "0" in column 2						AL L	OR	TOTAL	L. G. (8) 10)	
ય	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMA	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
¥ ∐		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RAT	ADDI		RATE	ADDI- TIONAL	
		AMENDMEN	T TOTAL	PAID FOR	/	-	FEE			FEE	
MENOMENT	Total	· 44	Minus	- 44	= /	X\$ 9	=	OR	X\$18=		
AME	Independent	· IO	Minus	/O	= /	X39:	=	OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+260=		
						+130 TO	Ł	OR	TOTAL		
		• •		ŧ	•	ADDIT. F		OR	ADDIT. FEE		
	DISTRICT ON THE	(Column 1)	(Column 2)	(Column 3)						
ENT B		REMAINING AFTER AMENDMEN	J. 47.27.2	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**	= .	X\$ 9:	2	OR	X\$18=	1 - 3 - 3 - 3 - 3	
4ME	Independent	•	Minus	***	=	X39=		OR	X78=		
_	FIRST PRESE	NTATION OF	MULTIPLE DEI	PENDENT CLAIM			-	\dashv			
	4/11/11/1						=	OR	+260=		
							AL EE		TOTAL ADDIT. FEE		
		(Column 1		(Column 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMEN!	13. 14	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
ENDMEN	Total	•	Minus	**	10	X\$ 9=		OR	X\$18=		
<u>u</u>	Independent		Minus	***	=			┨┈╏			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

OR

OR

X78=

+260=

TOTAL ADDIT, FEE

X39=

+130=